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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
		e the name that is on	Patricia	
	pictu	our government-issued cture identification (for xample, your driver's	First name	First name
	license or passport). Bring your picture	se or passport).	Middle name	Middle name
		Wiggins		
		identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer itification number	xxx-xx-8018	

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Case number (if known)

Debtor 1 Patricia Wiggins

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)		Business name(s)		
		EINs		EINs		
5.	Where you live	405 N Arizona Ave		If Debtor 2 lives at a different address:		
		Glenwood, IL 60425 Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code		
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:		Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
			_			

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Document Case number (if known) Debtor 1 Patricia Wiggins

7.	The chapter of the Bankruptcy Code you are			ef description of each, see <i>Notice Required b</i> o to the top of page 1 and check the appropri	y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ate box.
	choosing to file under	■ Cha	apter 7		
		☐ Cha	apter 11		
		☐ Cha	apter 12		
		☐ Cha	apter 13		
8.	How you will pay the fee		about how you	may pay. Typically, if you are paying the fee torney is submitting your payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money shalf, your attorney may pay with a credit card or check with
			need to pay The Filing Fee	tion, sign and attach the Application for Individuals to Pay	
		on only if you are filing for Chapter 7. By law, a judge may,			
		á	applies to you	family size and you are unable to pay the fee	your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.
			. ,,,		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.			
	•		District	When	Case number
			District	When	Case number
			District	When	Case number
10.	Are any bankruptcy	■ No			
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes			
			Debtor		Relationship to you
			District	When	Case number, if known
			Debtor		Relationship to you
			District	When	Case number, if known
11.	Do you rent your	■ No.	Go to li	e 12.	
	residence?	☐ Yes	. Has you	landlord obtained an eviction judgment again	nst you and do you want to stay in your residence?
				lo. Go to line 12.	
				10. G0 t0 lifte 12.	

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Page 4 of 57 Document Case number (if known) Debtor 1 **Patricia Wiggins** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Patricia Wiggins

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	Fatricia Wiggins				Odoc III	diffici (# known)		
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily money for a business or in					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not cons	umer debts or bu	siness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7 are paid that funds will be				nd administrative expenses	
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9		☐ 1,000-5,00 ☐ 5001-10,00 ☐ 10,001-25,	00	☐ 25,001-5 ☐ 50,001-1 ☐ More tha	00,000	
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,00 □ \$50,000,00	1 - \$10 million 01 - \$50 million 01 - \$100 million 001 - \$500 millior	□ \$1,000,0 □ \$10,000,	0,001 - \$1 billion 00,001 - \$10 billion 000,001 - \$50 billion an \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 101 - \$100,000 101 - \$500,000 1001 - \$1 million	□ \$10,000,00 □ \$50,000,00	1 - \$10 million 01 - \$50 million 01 - \$100 million 001 - \$500 millior	□ \$1,000, □ \$10,000	0,001 - \$1 billion 000,001 - \$10 billion 1,000,001 - \$50 billion an \$50 billion	
Part	7: Sign Below							
For	you	If I have	amined this petition, and I d chosen to file under Chapter tates Code. I understand the	r 7, I am aware that I m	ay proceed, if elig	gible, under Chapter 7,	11,12, or 13 of title 11,	
			rney represents me and I did t, I have obtained and read				elp me fill out this	
		I request	relief in accordance with the	e chapter of title 11, Un	ited States Code	, specified in this petition	on.	
		bankrupto and 3571	and making a false statemer cy case can result in fines u cia Wiggins					
		Patricia	Wiggins e of Debtor 1		Signature of D	Debtor 2		
		Executed	April 29, 2016 MM / DD / YYYY		Executed on	MM / DD / YYYY		

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Debtor 1 Patricia Wiggins Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David H. Cutler	Date	April 29, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
David H. Cutler		
Printed name		
Cutler & Associates, Ltd.		
Firm name		
4131 Main St		
Skokie, IL 60076		
Number, Street, City, State & ZIP Code		
Contact phone 847-673-8600	Email address	stuartIswanson@gmail.com
Bar number & State		

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Debtor 1	rmation to identify your	case:		
Deptor 1	Patricia Wiggins First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,125.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,125.00
Par	12: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	87,419.56
	Your total liabilities	\$	87,419.56
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,550.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,453.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

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Page 9 of 57 Case number (if known) Debtor 1 Patricia Wiggins

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

0.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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				Document	Page 10 of 57			
Fill in	this inf	ormation to identify	your case an	d this filing:				
Debto	n 1	Detricie Wie						
Depti	JI I	Patricia Wigg		liddle Name	Last Name			
Debto	or 2							
1	e, if filing)	First Name	M	liddle Name	Last Name			
Unite	d States	Bankruptcy Court for	the: NORTH	IERN DISTRICT OF I	LLINOIS			
Case	number							Check if this is an
								amended filing
Offi	cial F	orm 106A/B	Į.					
		_	-					
SCI	nedi	ıle A/B: Pr	operty	,				12/15
think it inform Answe	t fits best ation. If mer every qu	Be as complete and a nore space is needed, a uestion.	accurate as pos attach a separat	sible. If two married pe te sheet to this form. O	If an asset fits in more than o ople are filing together, both a n the top of any additional pag	re equally responsible	for supply	ing correct
Part 1	Descri	be Each Residence, Bu	uilding, Land, o	r Other Real Estate You	Own or Have an Interest In			
1. Do <u>y</u>	you own o	or have any legal or eq	uitable interest	in any residence, build	ling, land, or similar property?			
I	No. Go to I	Part 2.						
	res. Whe	re is the property?						
	_							
Part 2	Descri	be Your Vehicles						
3. Ca	one else o		vehicle, also re	eport it on <i>Schedule</i> G	es, whether they are registe 6: Executory Contracts and U		arry verne	ies you own that
3.1	Make:	Mercury		Who has an interest i	n the property? Check one			or exemptions. Put
	Model:	Cougar		■ Debtor 1 only				aims on Schedule D: Secured by Property.
	Year:	1996		Debtor 2 only				
		nate mileage:	95,000	Debtor 1 and Debto	or 2 only	Current value of t entire property?		urrent value of the ortion you own?
		formation:		☐ At least one of the o	•	p		,
		l via Kbb on 4/12/	16	At least one of the t	Jebiois and another			
	Varace	1 VIG 1155 OII 4/12/		Check if this is co	mmunity property	\$1,235	.00	\$1,235.00
Exa	nmples: B No Yes dd the do tges you Descri	oats, trailers, motors, ollar value of the por have attached for P	personal water tion you own art 2. Write th	ercraft, fishing vessels for all of your entrie nat number here	rehicles, other vehicles, and some some process and some process from Part 2, including an allowing items?	ccessories y entries for	port	\$1,235.00 rent value of the ion you own? not deduct secured
6. Ho	usehold	goods and furnishing	ngs					ns or exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Doc 1

portion you own?

Desc Main

page 2

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Case number (if known) Debtor 1 **Patricia Wiggins** Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$30.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... 17.1. Savings xxxxx7298 Chase \$10.00 Checking \$700.00 17.2. xxxxxx7536 Chase 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

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D	ebtor 1	Patricia Wiggins		Document	Page 13 of 57 Case number (if known)	
	☐ Yes.	Give specific information a	bout them			
26		s, copyrights, trademarks oles: Internet domain names				
		Give specific information a	bout them			
27	Examp ■ No	es, franchises, and other ples: Building permits, exclu Give specific information a	sive licenses		n holdings, liquor licenses, professional license	es
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref ■ No	funds owed to you				
	_	Give specific information ab	oout them, inc	cluding whether you alrea	ady filed the returns and the tax years	
29	Examp ■ No	support ples: Past due or lump sum Give specific information	<i>y,</i> 1	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30	Examp	amounts someone owes y ples: Unpaid wages, disabili benefits; unpaid loans Give specific information	ty insurance p		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
31		sts in insurance policies ples: Health, disability, or life	e insurance; h	nealth savings account (I	HSA); credit, homeowner's, or renter's insurar	nce
	_	Name the insurance compa Com	iny of each popany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32	If you a someo	terest in property that is dare the beneficiary of a living one has died. Give specific information			od surance policy, or are currently entitled to rece	eive property because
33	Examp ■ No	s against third parties, who bles: Accidents, employmen Describe each claim			it or made a demand for payment to sue	
34	. Other o		ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
35	■ No	nancial assets you did not	already list			
	☐ Yes.	Give specific information				
30					ny entries for pages you have attached	\$740.00

Official Form 106A/B Schedule A/B: Property page 4

			Doc 1	Filed 04/29/16 Document	Entered 0	4/29/16 12:50:17 57 Case number (if known)	Desc Main	
Debt	or 1 Patrici	a Wiggins				Case number (if known)		
Part 5	Describe Any	Business-Related	l Property You	Own or Have an Interest				
37. D o	you own or hav	e any legal or equ	itable interest	in any business-related p	roperty?			
	No. Go to Part 6.							
	Yes. Go to line 38	l.						
Part 6		Farm- and Commave an interest in fa		Related Property You Own Part 1.	n or Have an Interes	st In.		
46. D	o you own or h	nave any legal o	r equitable ir	nterest in any farm- or	commercial fishir	ng-related property?		
I	No. Go to Part	7.						
[☐ Yes. Go to line	47.						
Part 7	Describe	All Property You	Own or Have a	an Interest in That You Did	d Not List Above			
				did not already list?				
	•	on tickets, countr	y club membe	ership				
	No Vac Civa ana	ific information						
ш	res. Give spec	ilic information						
54.	Add the dollar	value of all of ye	our entries fr	om Part 7. Write that n	umber here			\$0.00
							<u> </u>	
Part 8	3: List the To	otals of Each Part	of this Form					
55.	Part 1: Total re	al estate, line 2						\$0.00
56.	Part 2: Total ve	hicles, line 5			\$1,235.00			
57.	Part 3: Total pe	ersonal and hou	sehold items	s, line 15	\$1,150.00			
58.	Part 4: Total fir	nancial assets, l	ine 36		\$740.00			
59.	Part 5: Total bu	usiness-related	property, line	e 45	\$0.00			
60.	Part 6: Total fa	rm- and fishing-	related prop	erty, line 52	\$0.00			
61.	Part 7: Total of	her property no	t listed, line	54 +	\$0.00			
62.	Total personal	property. Add lii	nes 56 throug	h 61	\$3,125.00	Copy personal property to	otal \$	3,125.00
63.	Total of all pro	perty on Schedu	ule A/B. Add	line 55 + line 62			\$3,1	25.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this inforr	mation to identify your	case:			
Debtor 1	Patricia Wiggins				
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is a
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	you own value from Check only one box for each exemption.		Specific laws that allow exemption
	Copy the value from Schedule A/B			
1996 Mercury Cougar 95,000 miles Valued via Kbb on 4/12/16	\$1,235.00		\$1,235.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Various used furniture and possessions valued at liquidation	\$375.00		\$375.00	735 ILCS 5/12-1001(b)
value: 1 bedroom set, 1 TV and small personal possessions Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
1 used computer, 1 used cell phone, 1 used radio	\$625.00		\$625.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Used personal clothing	\$150.00		\$150.00	735 ILCS 5/12-1001(a)
Line from Scriedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Cash	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	

Filed 04/29/16 Desc Main Case 16-14642 Doc 1 Entered 04/29/16 12:50:17 Document Page 16 of 57 Debtor 1 Patricia Wiggins Case number (if known) Brief description of the property and line on *Schedule A/B* that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B Savings xxxxx7298: Chase 735 ILCS 5/12-1001(b) \$10.00 \$10.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 5 ILCS 5/12-1001(b)

			ng xxxxxx7536: Chase	\$700.00		\$700.00	73
	LITTE	5 110111	Schedule PAB. 11.2			100% of fair market value, up to any applicable statutory limit	
3.		•	claiming a homestead exemption of to adjustment on 4/01/19 and every 3			iled on or after the date of adjustme	ent.)
		Yes.	. Did you acquire the property covere No Yes	ed by the exemption wi	thin 1	,215 days before you filed this case	e?

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Fill in this inform	nation to identify your	case:		
Debtor 1	Patricia Wiggins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Document	Page 18 of 57	_
Fill in this	information to identify your	case:		
Debtor 1	Patricia Wiggins			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LLINOIS	
	. ,			
Case numb	per			☐ Check if this is an amended filing
	Form 106E/F Ile E/F: Creditors W	ho Have Unsecured	I Claims	12/15
Schedule G: Schedule D: left. Attach t name and ca	Executory Contracts and Unexp Creditors Who Have Claims Sec	ired Leases (Official Form 106G). ured by Property. If more space is e. If you have no information to re	Do not include any creditors with partial needed, copy the Part you need, fill it or	B: Property (Official Form 106A/B) and on by secured claims that are listed in at, number the entries in the boxes on the e top of any additional pages, write your
	creditors have priority unsecure	d claims against you?		
■ No.	Go to Part 2.			
☐ Yes.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any	creditors have nonpriority unsec	ured claims against you?		
	You have nothing to report in this pa	art. Submit this form to the court with	n your other schedules.	
Yes.				
unsecur	ed claim, list the creditor separately	for each claim. For each claim liste	the creditor who holds each claim. If a credit, identify what type of claim it is. Do not list have more than three nonpriority unsecure	claims already included in Part 1. If more
				Total claim
4.1 Af		Last 4 digits of acc	count number 6774	\$120.64
13	npriority Creditor's Name 10 Martin Luther King Dri D Box 3517	ve When was the deb	ot incurred?	
Bl Nu	oomington, IL 61702-3517 mber Street City State Zlp Code to incurred the debt? Check one.		I file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and and	ther Type of NONPRIO	RITY unsecured claim:	
	Check if this claim is for a comm			
del Is t	ot he claim subject to offset?	Obligations arisi report as priority cla	ing out of a separation agreement or divorce	e that you did not
_	No		n or profit-sharing plans, and other similar d	ebts
	Yes	Other Specify	AT&T U-Verse	
		= Other. Opechy		

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Case number (if know)

Debtor	1 Patricia Wiggins		Case number (if know)	
4.2	Arcot Dwarakanathan MD	Last 4 digits of account number	1501	\$255.00
	Nonpriority Creditor's Name 19900 Governors Drive Olympia Fields, IL 60461	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	Other. Specify Medical		
4.3	Blatt, Hasenmiller, Leibsker & Moore Nonpriority Creditor's Name	Last 4 digits of account number	6752	\$4,059.52
	125 South Wacker Dr Suite 400	When was the debt incurred?		
	Chicago, IL 60604-4440	_		
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	_	Debts to pension or profit-sharir	a plans, and other similar debts	
	■ No	·	•	
	Yes	Other. Specify Citibank, N	A Sears XXX5600	
4.4	Capital One Na Nonpriority Creditor's Name	Last 4 digits of account number	1238	\$0.00
	Attn: General Correspondence Po Box 30285	When was the debt incurred?	Opened 6/01/04 Last Active 6/16/06	
	Salt Lake City, UT 84130			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
	Check if this claim is for a community debt	0 0 1	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Note Loan		

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Case number (if know)

Patricia Wiggins		Case number (if know)	
Capital Management Services, LP	Last 4 digits of account number	2604	\$13,820.68
Nonpriority Creditor's Name 698 1/2 South Ogden Street	When was the debt incurred?		
Buffalo, NY 14206-2317 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the claim is	or of the art and appry	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separareport as priority claims	ation agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	■ Other Specify Citibank, NA	•	
Cds/Escallate LLC	Last 4 digits of account number	1067	\$690.00
Nonpriority Creditor's Name			\$090.00
Attn:Bankruptcy 5200 Stoneham Rd Ste 200	When was the debt incurred?	Opened 4/01/14	
North Canton, OH 44720 Number Street City State Zlp Code	As of the date you file, the claim is	Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is	. Спеск ан тат арргу	
■ Debtor 1 only	O continuent		
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	alaim	
At least one of the debtors and another	Student loans	Cidilli.	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	Collection A Other. Specify LIc	Attorney Emp Of Cook County	
	. > <u>=10</u>		
Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	8521	\$7,489.00
Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 8/01/05 Last Active 2/19/13	
Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.		and the second s	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separareport as priority claims	ation agreement or divorce that you did not	
	☐ Debts to pension or profit-sharing	a plans, and other similar debts	
■ No			
☐ Yes	Other Specify Credit Card		

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Case number (if know)

DCDIO	Fatricia Wiggins		Case Humber (II know)	
4.8	Chase Card Services	Last 4 digits of account number	1589	\$6,131.00
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 7/01/06 Last Active 2/19/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Citibankna	Last 4 digits of account number	7165	\$480.00
	Nonpriority Creditor's Name	_	0	
	701 E 60th Street North Sioux Falls, SD 57117	When was the debt incurred?	Opened 9/01/97 Last Active 1/02/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Check Cred	dit Or Line Of Credit	
4.1	Client Services Inc	Last 4 digits of account number	8852	\$1,227.00
<u> </u>	Nonpriority Creditor's Name 3451 Harry S Truman Blvd	When was the debt incurred?		
	Saint Charles, MO 63301-4047 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Oncok all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Chase Ban		
	□ 169	Other. Specify	N AAA 1909	

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Document Page 22 of 57 Case number (if know) Debtor 1 Patricia Wiggins 4.1 Comenity Bank/Harlem Furniture 8634 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/01/06 Last Active Po Box 182125 When was the debt incurred? 12/10/12 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Consultants in Pathology, Sc 2113 \$203.23 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 30309 Charleston, SC 29417-0309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 **Dell Financial Services** 2473 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 3/15/07 Last Active Po Box 81577 When was the debt incurred? 2/28/10 Austin, TX 78708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Charge Account

☐ Student loans

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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1 Patricia Wiggins		Case number (if know)	
Discover Financial	Last 4 digits of account number	2261	\$6,414
Nonpriority Creditor's Name Attn: Bankruptcy	_	Opened 2/01/06 Last Active	
Po Box 3025 New Albany, OH 43054 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	9/30/13 is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Diversified Consultants, Inc	Last 4 digits of account number	6539	\$6
Nonpriority Creditor's Name PO Box 551268 Jacksonville, FL 32255-1268	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify US Cellula	<u>- </u>	
EMP of Cook County, LLC	Last 4 digits of account number	6385	\$69
Nonpriority Creditor's Name PO Box 13104 Belfast, ME 04915-4022	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		

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Case number (if know)

Federal State Exchange Unit Nonpriority Creditor's Name	Last 4 digits of account number 8018	\$2,839.00
Illinois Department of Revenue PO Box 19026 Springfield, IL 62794-9026	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify IL Dept of Revenue	
Franciscan Allliance	Last 4 digits of account number 9508	\$30.00
Nonpriority Creditor's Name PO Box 660383 Indianapolis, IN 46266-0383	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
GC Services Limited Partnership	Last 4 digits of account number 3023	\$3.517.50
Nonpriority Creditor's Name	Last 4 digits of account number	40,011100
6330 Gulfton	When was the debt incurred?	
Houston, TX 77081 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dami is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify IL Dept of Revenue	

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Case number (if know)

DCDI	Fatricia Wiggins	Odase Humber (II know)					
4.2 0	Hakeem Health Care Inc	Last 4 digits of account number 3979	\$490.00				
	Nonpriority Creditor's Name 1673 Paysphere Circle	When was the debt incurred?					
	Chicago, IL 60674-0016 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you report as priority claims	did not				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Medical					
4.2	Harris & Harris, Ltd	Last 4 digits of account number 6874	\$20,317.12				
	Nonpriority Creditor's Name 111 West Jackson Blvd Ste 400 Chicago II 60604 4424	When was the debt incurred?					
	Chicago, IL 60604-4134 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you report as priority claims	did not				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Franciscan St. James Health - Chicago Heights					
4.2	IC Systems, Inc	Last 4 digits of account number 2001	\$120.00				
_	Nonpriority Creditor's Name						
	444 Highway 96 East Po Box 64378	When was the debt incurred? Opened 9/01/14					
	St Paul, MN 55164 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you report as priority claims	did not				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	■ NO No	Other Specify Collection Attorney At T Uverse					
	LI TES	- Other Specify Collection Allonies All Cyerse					

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Case number (if know)

	- ao.a 111 99 o			
4.2 3	Linebarger4 Gogga Blair & Sampson	Last 4 digits of account numbe	r <u>3360</u>	\$3,939.00
	Nonpriority Creditor's Name PO Box 06140	When was the debt incurred?		
	Chicago, IL 60606-0140 Number Street City State Zlp Code	As of the date you file, the clair	n is: Chack all that annly	
	Who incurred the debt? Check one.	As of the date you me, the dan	ii is. Oncok ali that appry	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not	
	■ No	<u></u>	ring plans, and other similar debts	
	Yes	■ Other. Specify State of II		
4.2	Merchants Credit	Last 4 digits of account numbe	r 0378	\$425.00
	Nonpriority Creditor's Name 223 W Jackson Blvd	When was the debt incurred?	Opened 11/01/14	
	Ste 700			
	Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the clair	n is: Check all that apply	
	Who incurred the debt? Check one.	-		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a se report as priority claims		
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts	
	Yes	Other. Specify Collection Slee	n Attorney Prairie State Pulmonary	
4.2	Merchants' Credit Guide Co	Last 4 digits of account numbe	r 0378	\$425.00
5	Nonpriority Creditor's Name			V 120100
	Executive Offices	When was the debt incurred?		
	223 W. Jackson Blvd #700 Chicago, IL 60606			
	Number Street City State Zlp Code	As of the date you file, the clair	n is: Check all that apply	
	Who incurred the debt? Check one.	-		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a se report as priority claims		
	■ No		ring plans, and other similar debts	
	☐ Yes	■ Other Specify Prairie St	ate Pulmonary & Sleep Consult	

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Patricia Wiggins	Case number (if know)	
Northland Group Inc	Last 4 digits of account number 3029	\$537.56
Nonpriority Creditor's Name PO Box 39095	When was the debt incurred?	
Minneapolis, MN 55439	As of the later of the development of the later to	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Citibank, NA	
Oaklawn Radiology - St James	Last 4 digits of account number 1475	\$295.74
Nonpriority Creditor's Name	Last 4 digits of account number 1475	φ233.74
37241 Eagle Way	When was the debt incurred?	
Chicago, IL 60678-6067	As of the later of the development of the second	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
_	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical	
Omni Credit Services of Florida, Inc	Last 4 digits of account number 1079	\$403.74
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ+00.7+
PO Box 31179	When was the debt incurred?	
Tampa, FL 33631	Acceptable for the first of the	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Continued.	
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specify DSNB Macvs	

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Case number (if know)

DCDIO	ratiicia vviggiiis		Case Harriber (II know)				
4.2	Portfolio Recovery	Last 4 digits of account number	3298	\$4,135.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067	When was the debt incurred?	Opened 10/01/14				
	Norfolk, VA 23541 Number Street City State Zlp Code	- As of the date you file the claim i	is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify ■ Other. Specify					
4.3	Portfolio Recovery	Last 4 digits of account number	5600	\$3,841.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067	When was the debt incurred?	Opened 6/01/13				
	Norfolk, VA 23541						
	Number Street City State Zlp Code	is: Check all that apply					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	d alata.				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:				
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Factoring C	Company Account Citibank N.A.				
4.3	Prairie State Pulmonary	Last 4 digits of account number	9760	\$425.00			
	Nonpriority Creditor's Name PO Box 914	When was the debt incurred?					
	Richton Park, IL 60471-0914 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.	-					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes ☐ Other. Specify						

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Patricia Wiggins		Case number (if know)	
South Suburban Cardiology Assoc	Last 4 digits of account number	3831	\$2,698.40
Nonpriority Creditor's Name 3800 W. 203rd St Ste 201	When was the debt incurred?		
Olympia Fields, IL 60461-1184 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	Пол		
,	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	a olam.	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
□ Yes	Other. Specify Medical		
Specialty Physicians	Last 4 digits of account number	7250	\$163.88
Nonpriority Creditor's Name	When was the debt incurred?		<u> </u>
38132 Eagle Way Chicago, IL 60678-1381			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	a claim:	
☐ Check if this claim is for a community		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
☐Yes	Other. Specify Medical		
Synchrony Bank/ JC Penneys	Last 4 digits of account number	9643	\$0.00
Nonpriority Creditor's Name Attn: Bankrupty		Opened 10/01/92 Last Active	
Po Box 103104 Roswell, GA 30076	When was the debt incurred?	5/08/06	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
■ No	report as priority claims Debts to pension or profit-shari	ng plans, and other similar debts	
	· · · · · · · · · · · · · · · · · · ·		
☐ Yes	Other. Specify Charge Ac	count	

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Case number (if know) Debtor 1 Patricia Wiggins 4.3 Synchrony Bank/Walmart 5083 \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/01/93 Last Active Po Box 103104 When was the debt incurred? 2/13/05 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 The CBE Group 3059 \$670.25 Last 4 digits of account number 6 Nonpriority Creditor's Name 1309 Technology Parkway When was the debt incurred? Cedar Falls, IA 50613 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify ComEd 4.3 **Trustmark Recovery Services** 2123 \$295.74 Last 4 digits of account number Nonpriority Creditor's Name 541 Otis Bowen Drive When was the debt incurred? Munster, IN 46321 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Oaklawn Radiology Imaging at St James ☐ Yes

	Case	10-14042 DUC 1			/29/10 1.	2.50.17 Desc i	/lall1
Debtor 1	Patricia V	/iggins	Document Page 3	Case n	o / number (if kno	w)	
_	-	tore National Bank	Last 4 digits of account numbe	0310			\$203.00
, 	Nonpriority Cred Attn: Bankr Po Box 805 Mason, OH	uptcy 3 45040	When was the debt incurred?	Oper 12/11		6 Last Active	
		City State Zlp Code he debt? Check one.	As of the date you file, the clain	n is: Check	all that apply		
	Debtor 1 onl		☐ Contingent				
	Debtor 2 onl	•	☐ Unliquidated				
_	Debtor 1 and	•	☐ Disputed				
_	_	of the debtors and another	Type of NONPRIORITY unsecur	ed claim:			
_		s claim is for a community	☐ Student loans				
C	debt	bject to offset?	Obligations arising out of a se report as priority claims	paration ag	reement or div	vorce that you did not	
ı	No		Debts to pension or profit-shar	ing plans,	and other simi	lar debts	
I	☐ Yes		Other. Specify Charge A	ccount			
Name and Nations P.O Bo Lehigh Name and Nations P.O Bo Dehigh	ore than one color any debts d Address wide Credit x 26314 Valley, PA	reditor for any of the debts that in Parts 1 or 2, do not fill out or , Inc 18002	On which entry in Part 1 or Part 2 did you Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.8 of (Check one):	ou list the o Part 1: Part 2: 31 Ou list the o Part 1:	editors here. riginal creditor Creditors with Creditors with 161 riginal creditor Creditors with	If you do not have addition? Priority Unsecured Claims Nonpriority Unsecured Clair	nal persons to be
Part 4:	Add the Ar	mounts for Each Type of Un	secured Claim				
	ne amounts of unsecured cla		ms. This information is for statistical	reporting	purposes on	ly. 28 U.S.C. §159. Add the	amounts for each
						Total Claim	
To clai	6a.	Domestic support obligations		6a.	\$	0.00	
from Pa		Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.	•	njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority uns	ecured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a thro	ough 6d.	6e.	\$	0.00	

Total claims from Part 2

6f.	Student loans	6f.
6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.

Total Claim

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		17/1/11/11	311 1 1444 : 17 17 17	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Patricia Wiggins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the c er, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldio	Zii Gode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	O.t.y			2 0000	
2.4	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	-ity		Oldio		

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		DOGDINE	ui Paue ss c	11 37	
Fill in this	information to identify your	case:			
Debtor 1	Patricia Wiggins				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	. ,				
Case numb (if known)	per				☐ Check if this is an
					amended filing
Official	Form 106H				
		obtoro			40/45
schea	ule H: Your Cod	eptors			12/15
ill it out, an our name	nd number the entries in the and case number (if known)	boxes on the left. Attach Answer every question	the Additional Page t	o this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
1. Do y	ou have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana,				states and territories include
■ No.	Go to line 3.				
	. Did your spouse, former spou	ıse, or legal equivalent live	e with you at the time?		
			•		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	e
				☐ Schedule G, line	
	Number Street	Ctoto	ZIP Code	_	
C	City	State	ZIP Code		
22				Cohedula D. Sa	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, lin	 e
				☐ Schedule G, line	
	Number Street			_	
C	City	State	ZIP Code		

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						_			
Fill	in this information to identify you	r case:							
Del	btor 1 Patricia V	/iggins			_				
1 -	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number		_			Check if this is	s:		
(If kr	nown)					☐ An amend	•		
						A supplem 13 income		g postpetition ollowing date:	
0	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your In	come							12/1
	rt 1: Describe Employme Fill in your employment			our name	and				/ questior
	information.		Debtor 1			Debtor	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed□ Not employed			☐ Emp	loyed employed		
	information about additional employers.	Occupation	Retired						
	Include part-time, seasonal, or self-employed work.	Employer's name	Retired						
	Occupation may include stude or homemaker, if it applies.	nt Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About N	Ionthly Income							
	imate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	e space. Ind	clude your no	n-filing
	ou or your non-filing spouse have e space, attach a separate sheet		ombine the informatio	on for all e	empl	oyers for that pers	on on the li	nes below. If	you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sa deductions). If not paid month			2.	\$	0.00	\$	N/A	-
3.	Estimate and list monthly ov	ertime pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	0.00	\$	N/A	

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Deb	tor 1	Patricia Wiggins	-	С	ase	number (if know	n)				
						Debtor 1			Debtor filing s	2 or pouse	
	Cop	by line 4 here	4.		\$_	0.0	0	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	0.0	0	\$		N/A	١
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.0	0	\$		N/A	<u></u>
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.0	0	\$		N/A	<u>\</u>
	5d.	Required repayments of retirement fund loans	5d		\$	0.0	0	\$		N/A	
	5e.	Insurance	5e.		\$_	0.0		\$		N/A	
	5f.	Domestic support obligations	5f.		\$_	0.0		\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.		\$_ \$	0.0	<u>)0</u>)0	, <u>\$</u>		N/A N/A	
_		• • •	_	.т	Ψ_				-		_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	• <u> </u>	0.0		\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	^Б —	0.0	0	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.0	·n	\$		N/A	
	8b.	Interest and dividends	8b.		\$ -	0.0		\$—		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		* \$	0.0		\$		N/A	_
	8d.	Unemployment compensation	8d		\$_	0.0		\$		N/A	
	8e.	Social Security	8e.		\$	1,550.0		\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.		\$_ \$	0.0		\$ 		N/A N/A	
	8h.	Other monthly income. Specify:	8h.		$\overset{\mathtt{v}}{\$}-$		0 .	·		N/A	_
			_	_		0.0	<u> </u>				<u>-</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		1,550.0	0	\$		N/	Ά
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,550.00 +	\$		N/A	= \$	1,550.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				1,000.00	Ľ			Ŀ	1,000100
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,550.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi	ined Ily income
		No.									

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information	to identify yo	our case:							
Deb	otor 1 Pa	atricia Wig	gins			Che	eck if this is:			
	otor 2							wing postpetition chapter fithe following date:		
Unit	ed States Bankrupto	y Court for the	: NORTH		MM / DD / YYYY					
Cas	e number									
	nown)									
O	fficial Form	า 106J								
S	chedule J	: Your	Exper	ises				12/15		
info	as complete and ormation. If more mber (if known).	space is ne	eded, atta	If two married people ar ch another sheet to this n.	e filing together, b form. On the top o	oth are equal of any addit	ually responsible f ional pages, write	or supplying correct your name and case		
		Your House	hold							
1.	Is this a joint ca									
	Yes. Does D		in a separ	ate household?						
	□ No									
	☐ Yes. I	Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.			
2.	Do you have de	pendents?	■ No							
	Do not list Debto Debtor 2.	or 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state the							□ No		
	dependents nam	ies.						Yes		
								☐ Yes		
								□ No		
								Yes		
								□ No □ Yes		
3.	Do your expens	ses include	_	No				L res		
	expenses of pe		han 👝	Yes						
	yourself and yo	ur depende	nts? —							
Est		nses as of ye	our bankrı	uptcy filing date unless y				apter 13 case to report of the form and fill in the		
the		sistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	penses		
•	·									
4.	The rental or he payments and a			ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	500.00		
	If not included	in line 4:								
	4a. Real estat					4a.		0.00		
		homeowner's				4b.		0.00		
				ıpkeep expenses dominium dues		4c. 4d.		0.00 0.00		
5.				our residence, such as ho	me equity loans	5.	·	0.00		

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Deb	btor 1 Patricia Wiggins	Case number (if known)	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$.00
	6b. Water, sewer, garbage collection	6b. \$.00
	6c. Telephone, cell phone, Internet, satellite, and cable services		.00
	6d. Other. Specify:		.00
7.	Food and housekeeping supplies		.00
8.	Childcare and children's education costs	8. \$.00
9.	Clothing, laundry, and dry cleaning		.00
10.	Personal care products and services		.00
11.	Medical and dental expenses		.00
12.	Transportation. Include gas, maintenance, bus or train fare.		
	Do not include car payments.	12. \$ 350	
	Entertainment, clubs, recreation, newspapers, magazines, and book		.00
	Charitable contributions and religious donations	14. \$.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or		
	15a. Life insurance		0.00
	15b. Health insurance		0.00
	15c. Vehicle insurance		5.00
40	15d. Other insurance. Specify:		.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 Specify:		.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1		.00
	17b. Car payments for Vehicle 2		.00
	17c. Other. Specify:		.00_
	17d. Other. Specify:		.00
18.	Your payments of alimony, maintenance, and support that you did n		.00
10	deducted from your pay on line 5, Schedule I, Your Income (Official I Other payments you make to support others who do not live with yo		.00
19.	Specify:	19.	.00
20	Other real property expenses not included in lines 4 or 5 of this form		
20.	20a. Mortgages on other property		.00
	20b. Real estate taxes		0.00
	20c. Property, homeowner's, or renter's insurance	· 	0.00
	20d. Maintenance, repair, and upkeep expenses		0.00
	20e. Homeowner's association or condominium dues		.00
21.		· ,	0.00
۷.,	1 et Expenses	Σ1. ΤΨ	
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$1,453.0	<u>0</u>
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2 \$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 1,453.0	0
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 1,550	.00
	23b. Copy your monthly expenses from line 22c above.	23b\$ 1,45 3	5.00
	23c. Subtract your monthly expenses from your monthly income.	220 \$ 97	2.00
	The result is your monthly net income.	23c. \$.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Will have to start paying Medicare and Supplement in July 2016 will be about an additional 250 per month

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Fill in this in	formation to identify your	2222			
	•	case.			
Debtor 1	Patricia Wiggins First Name	Middle Name	Last Name		
Dobtor 0	First Name	Middle Name	Last Name	3	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	9	
United States	Bankruptcy Court for the:	NORTHERN DISTR	CICT OF ILLINOIS		
Case number	r				
(if known)					☐ Check if this is an amended filing
	orm 106Dec				
Declar	ation About a	ın Individu	al Debtor'	s Schedules	12/15
years, or botl	h. 18 U.S.C. §§ 152, 1341, 1 Sign Below				,000, or imprisonment for up to 20
Did you	ı pay or agree to pay some	one who is NOT an a	ittorney to help you	fill out bankruptcy forms?	,
■ No					
☐ Ye	s. Name of person				ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
	enalty of perjury, I declare y are true and correct.	that I have read the s	summary and sched	lules filed with this declara	ation and
X /s/ F	Patricia Wiggins		x		
Pati	ricia Wiggins lature of Debtor 1		Sign	nature of Debtor 2	

Date _____

Date April 29, 2016

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	in this inform	ation to identify you				
		nation to identify you				
De	btor 1	Patricia Wiggins First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number				_	Check if this is an
Sta Be a info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write yo	
Pa	rt 1: Give D	etails About Your Ma	nrital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calenda nuary 1 to De	r year: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$3,167.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Patricia Wiggins

	Debtor 1		Debtor 2			
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For the calendar year before that: (January 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$2,222.00	☐ Wages, commissions, bonuses, tips			
	☐ Operating a business		☐ Operating a business			
5. Did you receive any other incom Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint case.	her that income is taxable. Exa pensions; rental income; inter	amples of other income are al rest; dividends; money collect	ed from lawsuits; royalties; a			
List each source and the gross inco	ome from each source separa	tely. Do not include income th	at you listed in line 4.			
□ No						
Yes. Fill in the details.						
	Debtor 1		Debtor 2			
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:	SSI Benefits	\$6,200.00				
For last calendar year: (January 1 to December 31, 2015)	SSI Benefits	\$18,612.00				
For the calendar year before that: (January 1 to December 31, 2014)	SSI Benefits	\$6,000.00				
Part 3: List Certain Payments You	ı Made Before You Filed for ∣	Bankruptcy				
6. Are either Debtor 1's or Debtor 2	's debts primarily consume	r dehts?				
□ No. Neither Debtor 1 nor I	Debtor 2 has primarily consular personal, family, or household	umer debts. Consumer debts	are defined in 11 U.S.C. § 1	01(8) as "incurred by an		
During the 90 days before	ore you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more?			
☐ No. Go to line 7	7.					
paid that cr	☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.					
	it on 4/01/19 and every 3 years		or after the date of adjustmen	nt.		
Yes. Debtor 1 or Debtor 2 of During the 90 days before	or both have primarily consu		of \$600 or more?			
■ No. Go to line 7	7					
☐ Yes List below include pay	each creditor to whom you pai ments for domestic support of r this bankruptcy case.					
Creditor's Name and Address			Amount you Was this			

paid

still owe

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Debtor 1 se number (if known) **Patricia Wiggins** Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

per person Person to Whom You Gave the Gift and Address:

Gifts with a total value of more than \$600

Describe the gifts

Dates you gave the gifts

Value

Official Form 107

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14.	4. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No					
	Yes. Fill in the details for each gift or or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	on. Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	iptcy or	since you filed for bankruptcy, did yo	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Lic ce claims on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	preparir	ng a bankruptcy petition?	. ,	,, ,	rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	′ ou	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
	Cutler & Associates, Ltd. 4131 Main St Skokie, IL 60076 stuartIswanson@gmail.com		Attorney Fees		April 2016	\$255.00
	Credit Counseling				April 2016	\$14.95
17.	Within 1 year before you filed for bankrupromised to help you deal with your cre Do not include any payment or transfer tha No Yes. Fill in the details.	ditors o	to make payments to your creditors		r transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	u r busin es made a	ess or financial affairs? as security (such as the granting of a se		erty to anyone, othe	
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made

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Debtor 1 **Patricia Wiggins**

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details.		y property to a	a self-settle	ed trust or similar device	of which you are a
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Uni	ts	made
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associat No Yes. Fill in the details.	ther financial accour	nts; certificates	s of deposi		
		ast 4 digits of ecount number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, a	ny safe de	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p ■ No □ Yes. Fill in the details.	place other than your	home within 1	l year befo	re you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Inclu	ude any propei	rty you bor	rowed from, are storing f	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface	water, ground	• .		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		environmental	law, wheth	ner you now own, operate	e, or utilize it or used
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 **Patricia Wiggins**

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?			
	No			
	Yes. Fill in the details.	0	Environmental land (form	Data af matica
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, c	did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execut	ive of a corporation		
	☐ An owner of at least 5% of the voting or	equity securities of a corporation		
	No. None of the above applies. Go to Part	12.		
	☐ Yes. Check all that apply above and fill in the	ne details below for each business	<u>.</u>	
		scribe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.
28.	Within 2 years before you filed for bankruptcy, cinstitutions, creditors, or other parties.	did you give a financial statement to	o anyone about your business? Inclu	ıde all financial
	No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	te Issued		

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Patricia Wiggins
Patricia Wiggins
Signature of Debtor 2

Signature of Debtor 1

Date April 29, 2016
Date
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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Fill in this infor	mation to identify your	case:		
Debtor 1	Patricia Wiggins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo		n for Individu	ıals Filing Under	Chapter 7 12/15
If you are an ind	lividual filing under cha	pter 7, you must fill out t	his form if:	
creditors have	e claims secured by yo	ur property, or		
You must file th	is form with the court w ever is earlier, unless th		le your bankruptcy petition or l	by the date set for the meeting of creditors, d copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Patricia Wiggins	Case number (if known)	·
name: Descrip propert securin	у	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
For any u	rmation below. Do not list real estate le	Leases ou listed in Schedule G: Executory Contracts and Unexpire eases. Unexpired leases are leases that are still in effect; the value lease if the trustee does not assume it. 11 U.S.C. § 365(p)(e lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Under per property t	hat is subject to an unexpired lease. Patricia Wiggins	icated my intention about any property of my estate that se	
	ricia Wiggins ature of Debtor 1 April 29, 2016	Signature of Debtor 2 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-14642 Doc 1 Filed 04/29/16 Entered 04/29/16 12:50:17 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	re .	Patricia Wiggins		Case N			
			Debtor(s)	Chapte	er 7		
		DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR	DEBTOR(S)		
1.	con	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
		For legal services, I have agreed to accept		\$	1,255.00	-	
		Prior to the filing of this statement I have received	d	\$	255.00	_	
		Balance Due		\$	1,000.00	-	
2.	\$	335.00 of the filing fee has been paid.					
3.	Thε	e source of the compensation paid to me was:					
		■ Debtor □ Other (specify):					
4.	The	e source of compensation to be paid to me is:					
		■ Debtor □ Other (specify):					
5.		I have not agreed to share the above-disclosed con	npensation with any other person	unless they are n	nembers and associ-	ates of my law firm.	
		I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				f my law firm. A	
6.	In !	return for the above-disclosed fee, I have agreed to	render legal service for all aspect	ts of the bankrupt	cy case, including:		
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 						
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.						
			CERTIFICATION				
this		ertify that the foregoing is a complete statement of a kruptcy proceeding.	any agreement or arrangement for	payment to me f	or representation of	f the debtor(s) in	
	Apri	il 29, 2016	/s/ David H. Cutle	er			
_	Date		David H. Cutler Signature of Attorne				
			Cutler & Associat	tes, Ltd.			
			4131 Main St Skokie, IL 60076				
			847-673-8600 Fa		6		
			stuartlswanson@ Name of law firm	gmail.com			
			name oj taw jirm				

United States Bankruptcy CourtNorthern District of Illinois

		- 10- 0		
In re	Patricia Wiggins		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	1ATRIX	
		Number of	Creditors:	40
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	tors is true and correct to	the best of my
Date:	April 29, 2016	/s/ Patricia Wiggins Patricia Wiggins Signature of Debtor		

Afni 1310 Martin Luther King Drive PO Box 3517 Bloomington, IL 61702-3517

Arcot Dwarakanathan MD 19900 Governors Drive Olympia Fields, IL 60461

Blatt, Hasenmiller, Leibsker & Moore 125 South Wacker Dr Suite 400 Chicago, IL 60604-4440

Capital One Na Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital Management Services, LP 698 1/2 South Ogden Street Buffalo, NY 14206-2317

Cds/Escallate LLC Attn:Bankruptcy 5200 Stoneham Rd Ste 200 North Canton, OH 44720

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

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Citibankna 701 E 60th Street North Sioux Falls, SD 57117

Client Services Inc 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047 Comenity Bank/Harlem Furniture Po Box 182125 Columbus, OH 43218

Consultants in Pathology, Sc PO Box 30309 Charleston, SC 29417-0309

Dell Financial Services Po Box 81577 Austin, TX 78708

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Diversified Consultants, Inc PO Box 551268 Jacksonville, FL 32255-1268

EMP of Cook County, LLC PO Box 13104 Belfast, ME 04915-4022

Federal State Exchange Unit Illinois Department of Revenue PO Box 19026 Springfield, IL 62794-9026

Franciscan Allliance PO Box 660383 Indianapolis, IN 46266-0383

GC Services Limited Partnership 6330 Gulfton Houston, TX 77081

Hakeem Health Care Inc 1673 Paysphere Circle Chicago, IL 60674-0016

Harris & Harris, Ltd 111 West Jackson Blvd Ste 400 Chicago, IL 60604-4134 IC Systems, Inc 444 Highway 96 East Po Box 64378 St Paul, MN 55164

Linebarger4 Gogga Blair & Sampson PO Box 06140 Chicago, IL 60606-0140

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants' Credit Guide Co Executive Offices 223 W. Jackson Blvd #700 Chicago, IL 60606

Nationwide Credit, Inc P.O Box 26314 Lehigh Valley, PA 18002

Nationwide Credit, Inc P.O Box 26314 Lehigh Valley, PA 18002

Northland Group Inc PO Box 39095 Minneapolis, MN 55439

Oaklawn Radiology - St James 37241 Eagle Way Chicago, IL 60678-6067

Omni Credit Services of Florida, Inc PO Box 31179 Tampa, FL 33631

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Prairie State Pulmonary PO Box 914 Richton Park, IL 60471-0914

South Suburban Cardiology Assoc 3800 W. 203rd St Ste 201 Olympia Fields, IL 60461-1184

Specialty Physicians 38132 Eagle Way Chicago, IL 60678-1381

Synchrony Bank/ JC Penneys Attn: Bankrupty Po Box 103104 Roswell, GA 30076

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

The CBE Group 1309 Technology Parkway Cedar Falls, IA 50613

Trustmark Recovery Services 541 Otis Bowen Drive Munster, IN 46321

Visa Dept Store National Bank Attn: Bankruptcy Po Box 8053 Mason, OH 45040